

TEMADD ORDERS REQUEST

CNET-GEN 1320/1 (Rev. 8-76) S/N 0197-LL-NF0-1821

PRIVACY ACT NOTIFICATION: Under the authority of 5 USC 301, your social security number is solicited for the purpose of processing your request for temporary additional duty orders. Disclosure of your SSN is necessary to maintain a numerical identification system for individual travel claims. It will not be divulged without your written authorization to anyone other than Navy and/or Marine Corps personnel involved with the processing of the request. You are not required to provide this information; however, failure to do so may result in the denial of your request.

TO

FROM				VIA <input type="checkbox"/> A/C ASSIGN OFFICER <input type="checkbox"/> ALLOT. ADMIN. <input type="checkbox"/>				
Temporary additional duty orders are requested for the following personnel:						(For Allotment Administrator's Use)		
NAME		RANK/ RATE	SSN	TANGO NO.	ESTIMATED COST			
(Last)	(First)	(Middle)			PER DIEM	TRANS	TOTAL	
DEPART ON OR ABOUT		FOR (No. of days)		REIMBURSEMENT BASIS <input type="checkbox"/> PER DIEM <input type="checkbox"/> TRANSPORTATION <input type="checkbox"/> ACTUAL EXPENSE <input type="checkbox"/> NO EXPENSE (Authorization)				
PURPOSE (Reason for travel and refer to authority, if any) (Use reverse if necessary)					SECURITY CLEARANCE REQUIRED			
PLACES TO BE VISITED (If individual is to report, state to whom.) (Use reverse if necessary.)								
(Explain on reverse) <input type="checkbox"/> VARY ITINERARY AS NECESSARY		MODE OF TRANSPORTATION <input type="checkbox"/> GOVERNMENT AIR/VEHICLE <input type="checkbox"/> COMMERCIAL AIR/RR/BUS <input type="checkbox"/> PRIVATE AUTO <input type="checkbox"/> CLASS PRIORITY (MATS)						
GOVT. QTRS. AVAILABLE <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT KNOWN		SIGNATURE					DATE	
AIRCRAFT AVAILABILITY ENDORSEMENT								
A/C SCHEDULED <input type="checkbox"/> YES <input type="checkbox"/> NO		MODEL		SIGNATURE			DATE	
ALLOTMENT DATA ENDORSEMENT								
APPROPRIATION SYMBOL		SUBHEAD		OBJECT. CLASS.		BUREAU CONTROL NUMBER		SUBALLOT. NUMBER
AUTH. ACCOUNTING ACTIVITY		TYPE CODE		COST CODE		FUNDS AVAILABLE <input type="checkbox"/> YES <input type="checkbox"/> NO		BAL. AFTER OBLIGATION
SIGNATURE							DATE	
AUTHORIZING OFFICIAL'S ENDORSEMENT								
<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED				SIGNATURE			DATE	